PTO/SB/06 (12-04)

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| Substitute for Form PTO-875 Application of Docker Number Application of Docker Number Substitute for Form PTO-875 | | | | | | | | | | | Imber |
|--|---|---|---|---|------------------|---|--------------------|-----------------------------|----|----------------------------|-----------------------------|
| APPLICATION AS FILED - PART I (Column 1) (Column 2) | | | | | | | SMALL I | ENTITY | OR | OTHER THAN SMALL ENTITY | |
| | FOR | NUMBI | NUMBER FILED | | NUMBER EXTRA | | RATE (\$) | FEE (\$) | | RATE (\$) | FEE (\$) |
| | IC FEE FR 1.16(a), (b), or (c | :)) | N/A | | N/A | | N/A | | | N/A | |
| | RCH FEE FR 1.16(k), (i), or (m |)) I | N/A | 1 | N/A | | N/A | | | N/A | |
| EXAMINATION FEE (37 CFR 1.16(o), (p), or (q)) | | | N/A | | N/A | | N/A | | | N/A | |
| TOTAL CLAIMS (37 CFR 1.16(i)) | | | minus 20 | | | | x = | | OR | x = | |
| INDEPENDENT CLAIMS (37 CFR 1.16(h)) | | MS | minus 3 | = • | | | x = | | | x = | |
| FEE | LICATION SIZE CFR 1.16(s)) | sheets of is \$250 (\$ additional | If the specification and drawings ex sheets of paper, the application siz is \$250 (\$125 for small entity) for e additional 50 sheets or fraction the 35 U.S.C. 41(a)(1)(G) and 37 CFR | | | | | | | | |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j)) | | | | | | | N/A | | | N/A | |
| * If the difference in column 1 is less than zero, enter *0 in column 2. | | | | | | | TOTAL | | | TOTAL | |
| APPLICATION AS AMENDED – PART II (Column 1) (Column 2) (Column 3) | | | | | | | SMALL | ENTITY | OR | OTHER SMALL | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | RATE (\$) | ADDI- TIONAL FEE (\$) | | RATE (\$) | ADDI- TIONAL FEE (\$) |
| | Total (37 CFR 1.16(i)) | .35 | Minus | <i>"29</i> | - 6 | | × 25= | 150 | OR | х = | - |
| Q | Independent (37 CFR 1.16(h)) | 10 | Minus | <u>"" 8</u> | ¹ 2 | | × 100= | 200 | OR | х = | |
| ME | Application Size Fee (37 CFR 1.16(s)) | | | | | | · | | | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) | | | | | | | N/A | | OR | N/A | |
| | | | | | | • | TOTAL ADD'L FEE | 350 | OR | TOTAL ADD'L FEE | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | | |
| A F | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | RATE (\$) | ADDI- TIONAL FEE (\$) | | RATE (\$) | ADDI- TIONAL FEE (\$) |
| W | Total (37 CFR 1.16(i)) | • | Minus | ** | = | | х = | | OR | х = | • |
| ENDMENT | Independent (37 CFR 1.16(h)) | • | Minus | *** | = | | х = | | OR | х = | |
| I∑ | Application Size Fee (37 CFR 1.16(s)) | | | | | Į | | | | | |
| ⋖ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) | | | | | | N/A | | OR | N/A | |
| 8. If the enter in column 1 is less than the enter in column 2 write 10 in column 3 | | | | | | | TOTAL ADD'L FEE | | OR | TOTAL ADD'L FEE | |

* If the entry in column 1 is less than the entry in column 2, write "0 in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.